

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Walter Zinn

ADDRESS (number and street)

161 MLK Drive

Check if different  
than previously  
reported. (ACC)

Pontotoc

MS

38863

2. FEC IDENTIFICATION NUMBER ▼

C

C00575480

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

MS

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
06 / 02 / 2015in the  
State of

MS

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 23 / 2015

through

M M / D D / Y Y Y Y  
05 / 13 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kenneth Farr

Signature of Treasurer

Kenneth Farr

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
05 / 21 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 12

Write or Type Committee Name

**Friends of Walter Zinn**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7504.00	11552.53
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	7504.00	11552.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	14797.52	8794.41
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	14797.52	8794.41
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	-4540.87	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 12

Write or Type Committee Name

Friends of Walter Zinn

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1750.00

3950.00

(ii) Unitemized.....

5754.00

3102.53

(iii) TOTAL of contributions from individuals ▶

7504.00

7052.53

(b) Political Party Committees.....

0.00

2500.00

(c) Other Political Committees (such as PACs).....

0.00

2000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

7504.00

11552.53

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

7504.00

11552.53

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14797.52	8794.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	5.47
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	14797.52	8799.88

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2752.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7504.00
25. SUBTOTAL (add Line 23 and Line 24).....	10256.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14797.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-4540.87

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 12

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Friends of Walter Zinn**

Full Name (Last, First, Middle Initial)  
**Timothy Beacham**

Mailing Address 357 South Gamwyn Park Drive

City State Zip Code  
Greenville MS 38701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Comprehensive Pain Specialist

Occupation  
Physician

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 13 2015

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)  
**Wilbur Colom**

Mailing Address PO Box 866

City State Zip Code  
Columbus MS 39703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Colom Law Firm

Occupation  
Attorney

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 24 2015

Transaction ID : SA11AI.4273

Amount of Each Receipt this Period

500.00

Earmarked through ActBlue.

Full Name (Last, First, Middle Initial)  
**ActBlue**

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 24 2015

Transaction ID : SA11AI.4273.0

Amount of Each Receipt this Period

500.00

Total earmarked through conduit; PAC limit not affected

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Friends of Walter Zinn**

Full Name (Last, First, Middle Initial)

**Kevin Reevey**

Mailing Address 431 Lafayette Ave

City

Cincinnati

State

OH

Zip Code

45220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FSL Group

Occupation

Managing Director

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2015

Transaction ID : SA11AI.4297

Amount of Each Receipt this Period

250.00

Earmarked through ActBlue.

Full Name (Last, First, Middle Initial)

**ActBlue**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1947.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2015

Transaction ID : SA11AI.4297.0

Amount of Each Receipt this Period

250.00

Total earmarked through conduit; PAC limit not affected

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**Lee Whitley**

Mailing Address 10 West End Avenue

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAML

Occupation

Banking

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2015

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period

500.00

Earmarked through ActBlue.

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 12

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Walter Zinn**

Full Name (Last, First, Middle Initial)

**ActBlue****A.**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

1033.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2015

**Transaction ID : SA11Al.4258.0**

Amount of Each Receipt this Period

500.00

Total earmarked through conduit; PAC limit not affected

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

1750.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Walter Zinn

Full Name (Last, First, Middle Initial)

**A. Comcast**

Mailing Address 1701 John F Kennedy Boulevard,

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

City	State	Zip Code
Philadelphia	PA	19103

Purpose of Disbursement  
Advertising Services

Amount of Each Disbursement this Period

3275.75
---------

Transaction ID : SB17.4310

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

**B. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.4306

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

**C. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.4313

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6775.75



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Walter Zinn

Full Name (Last, First, Middle Initial)

**A. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.4314

**B. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.4319

**C. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : SB17.4320

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2550.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Walter Zinn

Full Name (Last, First, Middle Initial)

**A. James Hull**

Mailing Address PO Box 713

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2015

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Canvassing

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.4330

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

**B. I heart Radio**

Mailing Address 32 Avenue of the Americas

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2015

City	State	Zip Code
New York	NY	10013

Purpose of Disbursement  
Advertising Services

Amount of Each Disbursement this Period

680.00
--------

Transaction ID : SB17.4315

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

**C. Urban Radio**

Mailing Address 5026 Cliff Gookin Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2015

City	State	Zip Code
Tupelo	MS	38801

Purpose of Disbursement  
Advertising

Amount of Each Disbursement this Period

595.00
--------

Transaction ID : SB17.4340

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1575.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Walter Zinn

Full Name (Last, First, Middle Initial)

**A. James Warren**

Mailing Address 1160 MS-311

City	State	Zip Code
Holly Springs	MS	38635

Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

560.00
--------

Transaction ID : SB17.4331

**B. WCBi**

Mailing Address 201 5th Street South

City	State	Zip Code
Columbus	MS	39701

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2015

Amount of Each Disbursement this Period

1250.00
---------

Transaction ID : SB17.4321

**C. WLOV**

Mailing Address PO Box 213

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement  
Advertising Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2015

Amount of Each Disbursement this Period

284.75
--------

Transaction ID : SB17.4228

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2094.75

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

**Friends of Walter Zinn**

Full Name (Last, First, Middle Initial)

**A. WTVA**

Mailing Address 1359 Beech Springs Rd,

City State Zip Code  
Santillo MS 38866

Purpose of Disbursement  
Advertising Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 30 2015

Amount of Each Disbursement this Period

1075.50

Transaction ID : SB17.4308

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. WTWG**

Mailing Address 1910 14th Avenue N

City State Zip Code  
Columbus MS 39701

Purpose of Disbursement  
Advertising Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
05 01 2015

Amount of Each Disbursement this Period

255.00

Transaction ID : SB17.4243

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1330.50

14326.00